

MAR 25 2002

DECLARATION FOR PATENT APPLICATION

Docket Number : GMV-005.01

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

AMMONIUM SALTS OF HEMOGLOBIN ALLOSTERIC EFFECTORS, AND USES THEREOF

the specification of which (check one)

☐ is attached hereto.

☒ was filed on Date August 1, 2001 as United States Application Number 09/920,310, and was amended on Date ____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in Title 37, Code of Federal Regulation, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Claimed

☐ Yes ☐ No

☐ Yes ☐ No

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States Provisional application(s) listed below.

60/222,066

August 1, 2000

(Application Number)

(Filing Date)

(Application Number)

(Filing Date)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Number)

(Filing Date)

(Status: patented, pending, abandoned)

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I hereby appoint Beth E. Arnold, Reg. No. 35,430; Isabelle Clauss, Reg. No. 47,326; Kirk A. Damman, Reg. No. 42,461; Stephen B. Deutsch, Reg. No. 46,663; William D. DeVaul, Reg. No. 42,483; Daniel P. Gaudet, Reg. No. P-48,584; Robert W. Gauthier, Reg. No. 35,153; Jason Gish, Reg. No. 42,581; Dana Gordon, Reg. No. 44,719; Robert A. Greenberg, Reg. No. 44,133; Jennifer K. Holmes, Reg. No. 46,778; Scott E. Kamholz, Reg. No. P-48,543; David A. Lane, Reg. No. 39,261; W. Hugo Liepmann, Reg. No. 20,407; Jim Olesen, Reg. No. 46,967; Kevin A. Oliver, Reg. No. 42,049; Chinh H. Pham, Reg. No. 39,329; Philip C. Swain, Reg. No. 32,376; Kingsley L. Taft, Reg. No. 43,946; John Quisel, Reg. No. 47,874; Anita Varma, Reg. No. 43,221; Sharon Webb, Reg. No. 47,172; and John L. Welch, Reg. No. 28,129 as attorneys agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all telephone calls to Dana M. Gordon at telephone number (617) 532-1000.

Address all correspondence to:

Customer Id No: 25181

Patent Group
Foley Hoag & Eliot LLP
One Post Office Square
Boston, MA 02109-2170

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name): Yves Claude Nicolau

Inventor's signature: [Signature]

Residence: 15 Trinity Road, Newton, MA 02459 USA

Post Office Address: same

Date: 2/13/02

Citizenship: France

☒ Additional inventors are being named separately numbered sheets attached hereto.

Full name of second joint inventor (given name, family name): Jaime E. Lazarte

Inventor's signature: _____

Date: _____

Residence: 127 Booth Street, Needham, MA 02494

Citizenship: U.S.

Post Office Address: same

Full name of third joint inventor (given name, family name): Dennis R. Alford

Inventor's signature: _____

Date: _____

Residence: 100 Ocean View Drive - #506, Dorchester, MA 02125

Citizenship: U.S.

Post Office Address: same

Full name of fourth joint inventor (given name, family name): _____

Inventor's signature: _____

Date: _____

Residence: _____

Citizenship: _____

Post Office Address: _____

Full name of fifth joint inventor (given name, family name): _____

Inventor's signature: _____

Date: _____

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60/222,066 August 1, 2000
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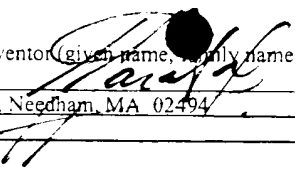
Post Office Address: same

Date: _____

Citizenship: France

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Full name of second joint inventor (given name, family name): Jaime E. Lazarte

Inventor's signature: 

Residence: 127 Booth Street, Needham, MA 02494

Post Office Address: same

Date: X 03-07-02

Citizenship: U.S.

Full name of third joint inventor (given name, family name): Dennis R. Alford

Inventor's signature: _____

Residence: 100 Ocean View Drive - #506, Dorchester, MA 02125

Post Office Address: same

Date: _____

Citizenship: U.S.

Full name of fourth joint inventor (given name, family name): _____

Inventor's signature: _____

Residence: _____

Post Office Address: _____

Date: _____

Citizenship: _____

Full name of fifth joint inventor (given name, family name): _____

Inventor's signature: _____

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Residence: ~~100 Ocean View Drive x 1506 x Dorchester, MA 02125~~

Citizenship: U.S.

Post Office Address: ~~same~~ / Residence: 17 Lander Avenue
Lynn, MA 01902-3054

Full name of fourth joint inventor (given name, family name): _____

Inventor's signature _____

Date: _____

Residence: _____

Citizenship: _____

Post Office Address: _____

Full name of fifth joint inventor (given name, family name): _____

Inventor's signature _____

Date: _____

Residence: _____

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Post Office Address: _____